Exhibit 19

UNIFORM BORROWER ASSISTANCE FORM

If you are experiencing a temporary or long-term hardship and need help, you must complete and submit this form along with other required documentation to be considered for available solutions. On this page, you must disclose information about (1) you and your intentions to either keep or transition out of your home; (2) the property's status; (3) bankruptcy; and (4) your credit counseling agency.

On Page 2, you must disclose information about <u>all</u> of your income, expenses and assets. Page 2 also lists the required income documentation that you must submit in support of your request for assistance. Then on Page 3, you must complete the Hardship Affidavit in which you disclose the nature of your hardship. The Hardship Affidavit informs you of the required documentation that you must submit in support of your hardship claim.

NOTICE: In addition, when you sign and date this form, you will make important certifications, representations and agreements, including certifying that all of the information in this Borrower Assistance Form is accurate and truthful and any identified hardship has contributed to your submission of this request for mortgage relief.

REMINDER: The Borrower Response Package you need to return consists of: (1) this completed, signed and dated Borrower Assistance Form; (2) completed and signed IRS Form 4506T-EZ (4506T for self-employed borrowers or borrowers with rental income); (3) required income documentation; and (4) required hardship documentation.

Loan Number Servicer's Name Shellpoint Mortgage Servicing	(usually found on your monthly mortgage statement)
I want to:	ate the Property
The property is currently: 🗵 My Primary Residence 🗌 A So	econd Home
The property is currently:	nter Occupied
BORROWER	CO-BORROWER
BORROWER'S NAME Karen D. Smith	CO-BORROWER'S NAME
SOCIAL SECURITY NUMBER DATE OF BIRTH	SOCIAL SECURITY NUMBER DATE OF BIRTH
HOME PHONE NUMBER WITH AREA CODE 206 329 9303	HOME PHONE NUMBER WITH AREA CODE
CELL OR WORK NUMBER WITH AREA CODE	CELL OR WORK NUMBER WITH AREA CODE
MAILING ADDRESS P.O. Box 22417 Seattle, WA 98122 PROPERTY ADDRESS (IF SAME AS MAILING ADDRESS, JUST WRITE SAME) 819 21st Ave Seattle, WA 98122	EMAIL ADDRESS kdelores@msn.com
Is the property listed for sale? Yes No If yes, what was the listing date? If property has been listed for sale, have you received an offer on the property? Yes No Date of offer: Amount of Offer: \$ Agent's Name: Agent's Phone Number: For Sale by Owner? Yes No	Have you contacted a credit counseling agency for help? Yes No If yes, please complete the counselor contact information below: Counselor's Name: Erin Rearden Agency's Name: Solid Ground Counselor's Phone Number: 206 694 6866 Counselor's Email Address: erinr@soild-ground.org
,	Yes No ress that fees are paid to:
Have you filed for bankruptcy? ✓ Yes ☐ No If yes: If yes, what is the filing Date: 6/5/08 & 5/14/09 Has your bankruptcy been	☐ Chapter 7 ☐ Chapter 11 ☐ Chapter 12 ☑ Chapter 13 discharged? ☑ Yes ☐ No Bankruptcy case number: 08-13473-PHB
Is any Borrower an active duty service member? Has any Borrower been deployed away from his/her primary residence is any Borrower the surviving spouse of a deceased service member with the surviving spouse of the surviving spouse of the surviving service member with the surviving spouse of the surviving service member with t	

UNIFORM BORROWER AS	SISTANO	E FORM					
Monthly Household I	ncome	Monthly Househo	old Expense yments	es and Debt	The state of the s	d Assets (associa and/or borrower retirement fund	(s)excluding
Gross wages	\$	First Mortgage Payment		\$	Checking Accou	ınt(s)	\$
Overtime	\$	Second Mortgage Payme	ent	\$	Checking Accou	ınt(s)	\$
Child Support / Alimony*	\$	Homeowner's Insurance		\$	Savings / Mone	y Market	\$
Non-taxable social security/SSDI	\$	Property Taxes		s	CDs		ş
Taxable SS benefits or other monthly income from annuities or retirement plans	\$	Credit Cards / Installmen minimum payment per n		\$	Stocks / Bonds		\$
Tips, commissions, bonus and self- employed income	\$	Alimony, child support pa	ayments	\$	Other Cash on	Hand	\$?
Rents Received	5	Car Lease Payments		\$	Other Real Esta	ite (estimated value)	\$
Unemployment Income	\$	HOA/Condo Fees/Proper	ty Maintenanc	e\$	Other		\$
Food Stamps/Welfare	s	Mortgage Payments on c	8			Car	Ś
Other	Ś	Other Monthly Expen		s		Jewlery	Ś
Total (Gross income)	\$ O	Total Household Expens		\$	Total Assets		\$
Any other liens (mortgage liens, m Lien Holder's Name		and Interest Rate	Loan Nur	mber		Lien Holder's Phone	Number
		Required Inco	me Docum	entation		U Las augus and also	
Do you earn a salary or hourly For each borrower who is a salary paid by the hour, include pays most recent 30 days' earnings reflecting year-to-date earning on the paystubs (e.g. signed leftom employer).	laried empl stub(s) reflect and docum gs, if not rep	entation either the roorted that reflect	orrower who ederal incom- most recent si is activity for t	receives self-ei e tax return an igned and date the most recen	d, as applicabled quarterly or at three month	ne, include a comple e, the business tax re year-to-date profit/l s; OR copies of bank ing continuation of b	eturn; AND oss statement statements for
documenting tip income Social Security, disability of Documentation showing provider, and Documentation showing Rental income: Copy of the most recent qualifying purposes will If rental income is not rebank statements or can Investment income: Copies of the two most Alimony, child support, or social Copy of divorce decree,	h as bonuse umentation e). r death bening the amount githe receip tilled federation for the celled rent correcent invesseparation in separation in the celled reaction in separation in separation in the celled reaction in separation in the celled reaction in separation in separation in the celled reaction in separation in the celled reaction in separation in the celled reaction in the ce	s, commissions, housing a describing the amount and describing the amount and effts, pension, public assist and frequency of the beat of payment, such as copical tax return with all schedine gross rent you reported schedule E—Supplemental checks demonstrating recessment statements or banks	Illowance, tip d nature of the tance, or ado nefits, such as es of the two ules, including d reduced by to I Income and ipt of rent. c statements se qualifying incen legal agree	s, or overtime: le income (e.g. ption assistants s letters, exhibit most recent bat g Schedule E— the monthly de Loss, provide a supporting rece come:* ement filed wit	ce: its, disability p ank statement: Supplement Ir but service on to copy of the co	olicy or benefits state s showing deposit an acome and Loss. Ren the property, if applic current lease agreeme ome.	ement from the nounts. tal income for cable; or ent with either
Copies of your two mos *Notice: Alimony, child support,		nk statements or other thin					for roppying

UNIFORM BORROWER ASSISTANCE FO	PRM
	HARDSHIP AFFIDAVIT
I am requesting review of my current financial s options. Date Hardship Began is: Most Re	ituation to determine whether I qualify for temporary or permanent mortgage loan relief
I believe that my situation is:	960960 OX 85 1000 10 10
Short-term (under 6 months) 📝 Medium	-term (6 – 12 months) Long-term or Permanent Hardship (greater than 12 months)
	payment because of reason set forth below:
(Please check the primary reason and submit rea	quired documentation demonstrating your primary hardship)
If Your Hardship is:	Then the Required Hardship Documentation is:
✓ Unemployment	✓ No hardship documentation required
Reduction in Income: a hardship that has caused a decrease in your income due to circumstances outside your control (e.g., elimination of overtime, reduction in regular working hours, a reduction in base pay)	□ No hardship documentation required
Increase in Housing Expenses: a hardship that has caused an increase in your housing expenses due to circumstances outside your control	No hardship documentation required
Divorce or legal separation; Separation of Borrowers unrelated by marriage, civil union or similar domestic partnership under applicable law	 □ Divorce decree signed by the court; OR □ Separation agreement signed by the court; OR □ Current credit report evidencing divorce, separation, or non-occupying borrower has a different address; OR □ Recorded quitclaim deed evidencing that the non-occupying Borrower or co-Borrower has relinquished all rights to the property
Death of a borrower or death of either the primary or secondary wage earner in the household	 □ Death certificate; OR □ Obituary or newspaper article reporting the death
Long-term or permanent disability; Serious illness of a borrower/co- borrower or dependent family member	Proof of monthly insurance benefits or government assistance (if applicable); OR Written statement or other documentation verifying disability or illness; OR Doctor's certificate of illness or disability; OR Medical bills None of the above shall require providing detailed medical information.
Disaster (natural or man-made) adversely impacting the property or Borrower's place of employment	☐ Insurance claim; OR ☐ Federal Emergency Management Agency grant or Small Business Administration loan; OR ☐ Borrower or Employer property located in a federally declared disaster area
☐ Distant employment transfer / Relocation	For active duty service members: Notice of Permanent Change of Station (PCS) or actual PCS orders. For employment transfers/new employment: Copy of signed offer letter or notice from employer showing transfer to a new employment location; OR Pay stub from new employer; OR If none of these apply, provide written explanation In addition to the above, documentation that reflects the amount of any relocation assistance provided, if applicable (not required for those with PCS orders).
Business Failure	Tax return from the previous year (including all schedules) AND Proof of business failure supported by one of the following: □ Bankruptcy filing for the business; OR □ Two months recent bank statements for the business account evidencing cessation of business activity; OR □ Most recent signed and dated quarterly or year-to-date profit and loss statement
Other: a hardship that is not covered above	Written explanation describing the details of the hardship and relevant documentation
	The state of the s

Borrower/Co-Borrower Acknowledgement and Agreement

I certify, acknowledge, and agree to the following:

- 1. All of the information in this Borrower Assistance Form is truthful and the hardship that I have identified contributed to my need for mortgage relief.
- 2. The accuracy of my statements may be reviewed by the Servicer, owner or guarantor of my mortgage, their agent(s), or an authorized third party*, and I may be required to provide additional supporting documentation. I will provide all requested documents and will respond timely to all Servicer, or authorized third party*, communications.
- 3. Knowingly submitting false information may violate Federal and other applicable law.
- 4. If I have intentionally defaulted on my existing mortgage, engaged in fraud or misrepresented any fact(s) in connection with this request for mortgage relief or if I do not provide all required documentation, the Servicer may cancel any mortgage relief granted and may pursue foreclosure on my home and/or pursue any available legal remedies.
- 5. The Servicer is not obligated to offer me assistance based solely on the representations in this document or other documentation submitted in connection with my request.
- 6. I may be eligible for a trial period plan, repayment plan, or forbearance plan. If I am eligible for one of these plans, I agree that:
 - a. All the terms of this Acknowledgment and Agreement are incorporated into such plan by reference as if set forth in such plan in full.
 - b. My first timely payment under the plan will serve as acceptance of the terms set forth in the notice of the plan sent by the Servicer.
 - c. The Servicer's acceptance of any payments under the plan will not be a waiver of any acceleration of my loan or foreclosure action that has occurred and will not cure my default unless such payments are sufficient to completely cure my entire default under my loan.
 - d. Payments due under a trial period plan for a modification will contain escrow amounts. If I was not previously required to pay escrow amounts, and my trial period plan contains escrow amounts, I agree to the establishment of an escrow account and agree that any prior waiver is revoked. Payments due under a repayment plan or forbearance plan may or may not contain escrow amounts. If I was not previously required to pay escrow amounts and my repayment plan or forbearance plan contains escrow amounts, I agree to the establishment of an escrow account and agree that any prior escrow waiver is revoked.
- 7. A condemnation notice has not been issued for the property.
- 8. The Servicer or authorized third party* will obtain a current credit report on all borrowers obligated on the Note.
- 9. The Servicer or authorized third party* will collect and record personal information that I submit in this Borrower Response Package and during the evaluation process. This personal information may include, but is not limited to: (a) my name, address, telephone number, (b) my social security number, (c) my credit score, (d) my income, and (e) my payment history and information about my account balances and activity. I understand and consent to the Servicer or authorized third party*, as well as any investor or guarantor (such as Fannie Mae or Freddie Mac), disclosing my personal information and the terms of any relief or foreclosure alternative that I receive to the following:
 - Any investor, insurer, guarantor, or servicer that owns, insures, guarantees, or services my first lien or subordinate lien (if applicable) mortgage loan(s) or any companies that perform support services to them; and
 - b. The U.S. Department of Treasury, Fannie Mae and Freddie Mac, in conjunction with their responsibilities under the Making Home Affordable program, or any companies that perform support services to them.
- 10. I consent to being contacted concerning this request for mortgage assistance at any telephone number, including mobile telephone number, or email address I have provided to the Lender/Servicer/ or authorized third party*. By checking this box, I also consent to being contacted by text messaging.

	04/23/2014		
Borrower Signature	Date	Co-Borrower Signature	Date

February 2013

^{*}An authorized third party may include, but is not limited to, a counseling agency, Housing Finance Agency (HFA) or other similar entity that is assisting me in obtaining a foreclosure prevention alternative.

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SMITH - Referral for Foreclosure Mediation Notice, per RCW 61.24.163(3) HAMP Application, Hardship Letter and other Documents

Making Home Affordable Program Request For Mortgage Assistance (RMA)



If you are experiencing a financial hardship and need help, you must complete and submit this form along with other required documentation to be considered for foreclosure prevention options under the Making Home Affordable (MHA) Program. You must provide information about yourself and your intentions to either keep or transition out of your property; a description of the hardship that prevents you from paying your mortgage(s); information about all of you income, expenses and financial assets; whether you have declared bankruptcy; and information about the mortgage(s) on your principal residence and other single family real estate that you own. Finally, you will need to return to your loan servicer (1) this completed, signed and dated Request for Mortgag Assistance (RMA); and (2) completed and signed IRS Form 4506-T or 4506T-EZ; and (3) all required income documentation identified in Section 4.

When you sign and date this form, you will make important certifications, representations and agreements, including certifying that all of the information in this RMA is accurate and truthful.

	SECTION 1: BORRO	VERINE	FORMATION
or succession sales	BORROWER		CO-BORROWER
	· · · · · · · · · · · · · · · · · · ·	CO-SOF	DEROWERS NAME
	ZERS NAME D. Smith		
44.40		SCICIAL	L SECURITY NUMBER DATE OF BIRTH (WM/DD/YY)
SOCIALS	SECURITY NUMBER DATE OF BIRTH (MIM/DD/YY)		
LICANE DI	HONE NUMBER WITH AREA CODE	HOME	E PHONE NUMBER WITH AREA CODE
	329-9303		
	WORK NUMBER WITH AREA CODE	CELLO	of work number with area code
		MAILIN	ING ADDRESS (IF SAME AS BORROWER, WE'E "SAME")
PO Bo	DA 22417 Seattle, WA 98122		
EMAILA		EMAIL	LADDRESS
kdelc	ores@msn.com		
	Cold behavior of the cold of t	ls arv bo	porrower a servicemember?
	y borrower filed for bankruptcy? Chapter 7 Chapter 13 OG (05 (08) 2011 and 2011 a	Have vo	ou recently been deployed away from your principal
	Date: 06/05/00 Bankruptcy case number:	residenc	ice or recently received a permanent change of station Yes No
Has you	ur bankruptcy been discharged?	order?	
	SECTION 2: HAR	ing review	wurder MHA.
	Lam having difficulty making my monthly payment beca	use of fina	ancial difficulties created by (check all that apply):
\boxtimes	My household income has been reduced. For example, reduced pay or hours, decline in business or self-employment earnings, death, disability or divorce of a borrower or co-borrower.	f 🗵	My monthly debt payments are excessive and I am overexter dad with my creditors. Debt includes credit cards, home equity or other debt.
\boxtimes	My expenses have increased. For example: monthly mortgage payment reset, high medical or health care costs, uninsured losses, increased utilities or property taxes.	\boxtimes	My cash reserves, including all liquid as sets, are insufficient to maintain my current mortgage payment and cover basic living expenses at the same tin
	II am unemployed and (a) I am receiving/will receive unemployment benefits or (b) my unemployment benefits ended less than 6 months ago.	Other	
Synland	tion (continue on a separate sheet of paper if necessary):		100 100 100 100 100 100 100 100 100 100
-xpiana	tion (continue on a separate since of papers		
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SMITH - Referral for Foreclosure Mediation Notice, per RCW 61.24.163(3) HAMP Application, Hardship Letter and other Documents

(Th	SEC is section is required eve	TION 3: PRINCIPAL RES	SIDENCE INFORMATION mortgage assistance on	V your principal re≨dence)	
		mortgage assistance with my		es 🗌 No	
	If "yes", I	want to: 🗵 Keep the prop	perty Sell the proper	rty	
Property Address: 819	21st Avenue, Sea	ttle, WA 98122			mber:
	he property?	No Lien Holder / Service	er Name: Shellpc	Loan LD. Nu	mber:
		A) fees? Yes X No		Are fees paid cu	rrent? Yes No
Name and address that fees a					
Annual Homeowner's Insuran is the property listed for sale?	Yes No	☐ Yes ☑ No If "Yes", Listing Agent's Name	e:	Phone Number:	
List date?	Have you received a p	urchase offer? Yes u are requesting mortgage a	No Amount of Offer \$	O de la	osing Date:
Is the mortgage on your prin	ncipal residence paid?	Yes No if 'No", nu	INSE OF BORROWER A	The second secon	
Monthly Hous	ehold Income	(*Principal Resider	nce Expense Only)		
Monthly Gross wages	\$	First Mortgage Principal & Interest Payment*	\$	Checking Account(s)	\$
Overtime	\$	Second Mortgage Principal & Interest Payment*	\$	Checking Account(s)	\$
self employment Income	\$	Homecwner's Insurance*	5	Savings / Money Market	\$
Jnemployment Income	\$	Property Taxes*	5	CDs	\$
Jntaxed Social Security / SSD	\$	HOA/Condo Fees*	\$	Stocks / Bonds	\$
Food Stamps/Welfare	\$	Credit Cards/Installment debt (total min. payment)	\$	Other Cash on Hand	\$
axable Social Security or etirement income	\$	Child Support / Alimony	S		
Child Support / Alimony**	\$	Car Payments	\$		
ips, commissions, bonus ind overtime	5	Mortgage Payments other properties****	\$	Value of all Real Estate except	
Gross Rents Received ***	s	Other	\$	principal residence	\$
Other	\$			Other	\$
Total (Gross income)	\$	Total Debt/Expenses	\$	Total Assets	\$
	-in-d from all proporties you	e need not be disclosed if you o own EXCEPT a property for wh n EXCEPT your principal resider	ich you are seeking mortgage	assistance in section o.	

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SMITH - Referral for Foreclosure Mediation Notice, per RCW 61.24.163(3) HAMP Application, Hardship Letter and other Documents

(Your servicer may	request additional documentation to complete	your evaluation for MHA)
Borrowers	☑ Include a signed IRS Form 4506-T or 4506T-EZ	
Do you earn a wage?	For each borrower who is a salaried employee or hou at least 30 days of year-to-date income.	rly wage earner, provide the most recent pay stub(s) that reflects
Borrower Hire Date (MM/DD/YY)	at least 30 days of year-to-date income.	
Co-borrower Hire Date (MM/DD/YY)		
] Are you self-employed?	Provide your most recent signed and dated quarterly	
Do you receive tips, commissions, bonuses, housing allowance or overtime?	income (e.g. employment contracts or printouts doc	eive the income and third party documentation describing the umenting tip income).
Do you receive social security, disability, death] benefits, pension, public assistance or adoption assistance?	 benefits statement from the provider and receipt of padvices). 	quency of the benefits, such as letters, exhibits, disability policy o payment (such as two most recent bank statements or deposit
assistance:	Provide a copy of the divorce decree, separation agrestates the amount of the payments and the period of	ement, or other written legal agreement filed with the court that time that you are entitled to receive them. AND
Do you receive alimory, child support, or separation	Copies of your two most recent bank statements or o	deposit advices showing you have received payment.
maintenance payments?	Notice: Alimony, child support or separate maintena	nce income need not be disclosed if you do not choose to
	have it considered for repaying your mortgage debt.	
and the state of t	☐ Provide your most recent Federal Tax return with all	schedules, including Schedule E.
Do you have income from rental properties that are not your principal residence?	If rental income is not reported on Schedule E, provi	de a copy of the current lease agreement with bank statements
	SECTION 5: OTHER PROPERTIES OWNED perfies that you or the co-borrower own, other than your perficultion is below. Use additional sheets if necessary.) Other Property #1	
THE STATE OF THE OWNER OF THE OWNER OF THE OWNER.		Loan I.D. Number:
Property Address:		
Servicer Name:	Mortgage Balance \$	Current Value \$
	Mortgage Balance \$ I home	Current Value \$
	I home	Current Value \$ Monthly mortgage payment* \$
	Mortgage Balance \$ I home Rented Gross Monthly Rent \$ Cother Property #2	Current Value \$
Property is:	I home	Current Value \$ Monthly mortgage payment* \$
Property is:	I home Rented Gross Monthly Rent \$	Current Value \$ Monthly mortgage payment* \$ Loan I.D. Number:
Property is:	I home Rented Gross Monthly Rent \$ Other Property #2 Mortgage Balance \$	Current Value \$
Property is:	Char Property #2 Char Property #3 Char Property #4 Char Proper	Current Value \$
Property is:	Rented Gross Monthly Rent S Cyther Property #2	Current Value \$
Property is:	Other Property #2 Mortgage Balance \$ I home Rented Gross Monthly Rent \$ Other Property #2 Mortgage Balance \$ Other Property #3	Current Value \$
Property is:	Cyther Property #2	Current Value \$ Monthly mortgage payment* \$ Loan I.D. Number: Current Value \$ Monthly mortgage payment* \$ Loan I.D. Number:

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SMITH - Referral for Foreclosure Mediation Notice, per RCW 61.24.163(3) HAMP Application, Hardship Letter and other Documents

THE REPORT OF THE PROPERTY OF

	SECTION 6: OTHER PROPERTY FOR WHICH ASSISTANCE IS REQUESTED. (Complete this section ONLY if you are requesting mortgage assistance with a property that is not your princ	ipal residence)
	I am requesting mortgage assistance with a rental property . 🔲 Yes 🔲 No	
	I am requesting mortgage assistance with a second or seasonal home . Yes No	
	If "Yes" to either, I want to: Keep the property Sell the property	
Property Addi	ddress: Lo	an I.D. Number:
Do you have a	e a second mortgage on the property Yes No If "Yes", Servicer Name: Loan I.D. Nu	imber:
	re condominium or homeowner association (HOA) fees? Yes No If "Yes", Monthly Fee \$ Are HOA fee	
	address that fees are paid to:	
	mortgage payment include taxes and insurance? 🔲 Yes 📋 No If "No", are the taxes and insurance paid current?	☐ Yes ☐ No
	meowner's Insurance \$ Annual Property Taxes \$	
	ig assistance with a rental property, property is currently: □ Vacant and available for rent. □ Occupied without rent by your legal dependent, parent or grand; □ Occupied by a tenant as their principal residence. □ Other	
frental prop	prostick occupied by a tenant: Term of lease / occupancy / / / _ / _ Gross Monthly Rent \$	
	operty is vacant, describe efforts to rent property:	
irrentar prop	pperty to recently decrease.	
	Phone Phone Phone Have you received a purchase offer? Yes No Amount of Offer \$	
	RENTAL PROPERTY CERTIFICATION (You must complete this certification if you are requesting a mortgage modification with respect to a re	ntal property.)
By che	hecking this box and initialing below, I am requesting a mortgage modification under MHA with respect to the rental property:	
1.	I intend to rent the property to a tenant or tenants for at least five years following the effective date of my mortgage is servicer, the U.S. Department of the Treasury, or their respective agents may ask me to provide evidence of my intentitime. I further understand that such evidence must show that I used reasonable efforts to rent the property to a tenar the property is or becomes vacant during such five-year period.	nt or tenants on a year-round basis, if
	<u>Note</u> : The term "reasonable efforts" includes, without limitation, advertising the property for rent in local newspapers, forms of written or electronic media, and/or engaging a real estate or other professional to assist in renting the properent.	ity, in control sale, at a control
2.	The property is not my secondary residence and I do not intend to use the property as a secondary residence for at led date of my mortgage modification. I understand that if I do use the property as a secondary residence during such five may be considered to be inconsistent with the certifications I have made herein.	e-year period, my use of the proposity
	<u>Note:</u> The term "secondary residence" includes, without limitation, a second home, vacation home or other type of reoccupy on a part-time, seasonal or other basis.	
3.	I do not own more than five (5) single-family homes (i.e., one-to-four unit properties) (exclusive of my principal reside	
or gran	ithstanding the foregoing certifications, I may at any time sell the property, occupy it as my principal residence, or andparent to occupy it as their principal residence with no rent charged or collected, none of which will be conside ications made herein.	permit my legal dependent, paren red to be inconsistent with the
This cer	ertification is effective on the earlier of the date listed below or the date the RMA is received by your servicer.	
	Borrower Co-borrower	
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	1 080	

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SMITH - Referral for Foreclosure Mediation Notice, per RCW 61.24.163(3) HAMP Application, Hardship Letter and other Documents

SECTION 7: DODD -FRANK CERTIFICATION	
Hard Marking Colors and Colors and Armed	

The following information is requested by the federal government in accordance with the Dodd-Frank Wall Street Reform and Consumer Protection Act (Pub. L. 111-203). You are required to furnish this information. The law provides that no person shall be eligible to begin receiving assistance from the Making Horne Affordable Program, authorized under the Emergency Economic Stabilization Act of 2008 (12 U.S.C. 5201 et seq.), or any other mortgage assistance program authorized or funded by that Act, if such person, in connection with a mortgage or real estate transaction, has been convicted, within the last 10 years, of any one of the following: (A) felony larceny, theft, fraud, or forgery, (B) money laundering or (C) tax evasion.

I/we certify under penalty of perjury that I/we have not been convicted within the last 10 years of any one of the following in connection with a mortgage or real estate transaction:

- (a) felony larceny, theft, fraud, or forgery,
- (b) money laundering or
- (c) tax evasion.

I/we understand that the servicer, the U.S. Department of the Treasury, or their respective agents may investigate the accuracy of my statements by performing routine background checks, including automated searches of federal, state and county databases, to confirm that I/we have not been convicted of such crimes. I/we also understand that knowingly submitting false information may violate Federal law. This certification is effective on the earlier of the date listed below or the date this RMA is received by your servicer.

SECTION 8: INFORMATION FOR GOVERNMENT MONITORING PURPOSES

The following information is requested by the federal government in order to monitor compliance with federal statutes that prohibit discrimination in housing. You are not required to furnish this information, but are encouraged to do so. The law provides that a lender or servicer may not discriminate either on the basis of this information, or on whether you choose to furnish it. If you furnish the information, p ease provide both ethnicity and race. For race, you may check more than one designation. If you do not furnish the information on the basis of visual observation or surname if you have made this request for a loan modification in berson. If you do not wish to furnish the information, please check the box below.

ORROWER		I do not wish to furnish this	information	CO-BORROV	VER	I do not wish to furnish this information
thnicity:	-	Hispanic or Latino Not Hispanic or Latino		Ethnicity:	Laure	Hispanic or Latino Not Hispanic or Latino
'ace:		American Indian or Alaska N Asian	Native	Roce:		
	×	Black or African American Native Hawaiian or Other P	acific Islander			Native Hawaiian or Other Pacific Islander
ex:	×	White Female Male		Sex:		Female
his request		To	o bie completed by Interviewer Interviewer's Narr e (print or type) & ID Numb	per		Name/Address of Menviewer's Employer
☐ Face-to		Interview	Interviewer's Signature	Date		
☐ Teleph☐ Interne			Interviewer's Phone Number (include area co	ode)		

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SECTION 9: BORROWER AND CO-BORROWER ACKNOWLEDGEMENT AND AGREEMENT

- I certify that all of the information in this RMA is truthful and the hardship(s) identified above has contributed to submission of this request for mortgage
 relief
- I understand and acknowledge that the Servicer, the U.S. Department of the Treasury, the owner or guarantor of my mortgage loan, or their respective
 agents may investigate the accuracy of my statements, may require me to provide additional supporting documentation and that knowlingly submitting
 false information may violate Federal and other applicable law.
- Lauthorize and give permission to the Servicer, the U.S. Department of the Treasury, and their respective agents, to assemble and use a current consumer report on all borrowers obligated on the loan, to investigate each borrower's eligibility for MHA and the accuracy of my statements and any documentation that I provide in connection with my request for assistance. I understand that these consumer reports may include, without limitation, a credit report, and be assembled and used at any point during the application process to assess each borrower's eligibility thereafter.
- 4. Lunderstand that if I have intentionally defaulted on my existing mortgage, engaged in fraud or if it is determined that any of my statements or any information contained in the documentation that I provide are materially false and that I was ineligible for assistance under MHA, the Servicer, the U.S. Department of the Treasury, or their respective agents may terminate my participation in MHA, including any right to future benefits and incentives that otherwise would have been available under the program, and also may seek other remedies available at law and in equity, such as recouping any penellosis or incentives previously received.
- 5. I certify that any property for which I am requesting assistance is a habitable residential property that is not subject to a condemnation notice.
- Leertify that I am willing to provide all requested documents and to respond to all Servicer communications in a timely manner. I understand that time is of the essence.
- I understand that the Servicer will use the information I provide to evaluate my eligibility for available relief options and foreclosure alternatives, but the
 Servicer is not obligated to offer me assistance based solely on the representations in this document or other documentation submitted in connection with
 my request.
- 8. I am willing to commit to credit counseling if it is determined that my financial hardship is related to excessive debt.
- If I am eligible for assistance under MHA, and I accept and agree to all terms of an MHA notice, plan, or agreement, I also agree that the terms of this
 Acknowledgment and Agreement are incorporated into such notice, plan, or agreement by reference as if set forth therein in full. My first timely payment, if
 required, following my servicer's determination and notification of my eligibility or prequalification for MHA assistance will serve as my acceptance of the
 terms set forth in the notice, plan, or agreement sent to me.
- 10. I understand that my Servicer will collect and record personal information that I submit in this RMA and during the evaluation process, including, but not limited to, my name, address, telephone number, social security number, credit score, income, payment history, government monitoring information, and information about my account balances and activity. I understand and consent to the Servicer's disclosure of my personal information and the terms of any MHA notice, plan or agreement to the U.S. Department of the Treasury and its agents, Fannie Mae and Freddie Mac in connection with their responsibilities under MHA, companies that perform support services in conjunction with MHA, any investor, insurer, guarantor, or servicer that dwns, insures, guarantees, o services my first lien or subordinate lien (if applicable) mortgage loan(s) and to any HUD-certified housing counselor.
- I consent to being contacted concerning this request for mortgage assistance at any e-mail address or cellular or mobile telephone number I have provided to the Servicer. This includes text messages and telephone calls to my cellular or mobile telephone.

The undersigned certifies under penalty of perjury that all statements in this document are true and correct.

			12/23/16
Borrower Signature	Social Security Number	Date of Birth	Date
Co-borrower Signature	Social Security Number	Date of Birth	Date

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SMITH - Referral for Foreclosure Mediation Notice, per RCW 61.24.163(3) HAMP Application, Hardship Letter and other Documents

HOMEOWNER'S HOTLINE

If you have questions about this document or the Making Home Affordable Program, please call your servicer. If you have questions about the program that your servicer cannot answer or need further counseling, you can call the Homeowner's HOPE™ Hotline at 1-888-995-HOPE (4673).



The Hotline can help with questions about the program and offers free HUD-certified counseling services in English and Spanish.

NOTICE TO BORROWERS

Return your completed, signed and dated form to your mortgage servicer/company. If you're unsure of where to send the form, visit the Making Home Affordable website, www.makinghomeaffordable.gov. Find your mortgage company information by clicking: Get Answers >> Contact My Mortgage Company.

Be advised that by signing this document you understand that any documents and information you submit to your servicer in connection with the Making Home Affordable Program are under penalty of perjury. Any misstatement of material fact made in the completion of these documents including but not limited to misstatement regarding your occupancy of your property, hardship circumstances, and/or income, expenses, or assets will subject you to potential criminal investigation and prosecution for the following crimes: perjury, false statements, mail flaud, and wire fraud. The information contained in these documents is subject to examination and verification. Any potential misrepresentation will be referred to the appropriate law enforcement authority for investigation and prosecution. By signing this document you certify, represent and agree that: "Under penalty of perjury, all documents and information I have provided to my servicer in connection with the Making Home Affordable Program, including the documents and information regarding my eligibility for the program, are true and correct."

If you are aware of fraud, waste, abuse, mismanagement or misrepresentations affiliated with the Troubled Asset Relief Program, please contact the SIGTARP Hotline by calling 1-877-SIG-2009 (toll-free), or www.sigtarp.gov and provide them with your name, our name as your servicer, your property address, loan number and the reason for escalation.

Beware of Foreclosure Rescue Scams. Help is FREE!

- There is never a fee to get assistance or information about the Making Home Affordable Program from your lender or a HUD-approved housing counselor.
- Beware of any person or organization that asks you to pay a fee in exchange for housing counseling services or modification of a delinquent loan.
- Beware of anyone who says they can "save" your home if you sign or transfer over the deed to your house. Do not sign over the deed to
 your property to any organization or individual unless you are working directly with your mortgage company to forgive your debt.
- Never make your mortgage payments to anyone other than your mortgage company without their approval.
- If you think you've been scammed, visit www.makinghomeaffordable.gov. Click on Get Answers >> Avoid Scams/File a Complaint.



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SMITH - Referral for Foreclosure Mediation Notice, per RCW 61.24.163(3)

HAMP Application, Hardship Letter and other Documents

Making Home Affordable Program Request For Mortgage Assistance (RMA)



If you are experiencing a financial hardship and need help, you must complete and submit this form along with other required documentation to be considere for foreclosure prevention options under the Making Home Affordable (MHA) Program. You must provide information about yourself and your intentions t either keep or transition out of your property; a description of the hardship that prevents you from paying your mortgage(s); information about <u>all</u> of you income, expenses and financial assets; whether you have declared bankruptcy; and information about the mortgage(s) on your principal residence and othe single family real estate that you own. Finally, you will need to return to your loan servicer (1) this completed, signed and dated Request for Mortgag Assistance (RMA); and (2) completed and signed IRS Form 4506-T or 4506T-EZ; and (3) all required income documentation identified in Section 4.

When you sign and date this form, you will make important certifications, representations and agreements, including certifying that all of the information in this RMA is accurate and truthful.

-		
	BORROWER	CO-BORROWER
	vers name n D. Smith	CO-BORROWER'S NAME
SOCIAL	SECURITY NUMBER DATE OF BIRTH (MM/DD/YY)	SOCIAL SECURITY NUMBER DATE OF BIRTH (MM/DD/YY)
	HONE NUMBER WITH AREA CODE 329 9303	HOME PHONE NUMBER WITH AREA CODE
CELL OF	WORK NUMBER WITH AREA CODE	CELL OR WORK NUMBER WITH AREA CODE
	SADDRESS DX 22417 Seattle, WA 98122	MAILING ADDRESS (IF SAME AS BORROWER, WRITE "SAME")
EMAIL A	DDRESS pres@msn.com	EMAIL ADDRESS
Has any	borrower filed for bankruptcy? Chapter 7 Chapter 13	Is any borrower a servicemember?
Filing D		Have you recently been deployed away from your principal residence or recently received a permanent change of station Yes No.
How m	any single family properties other than your principal residence do you and/or and emortgage on your principal residence ever had a Home Affordable Modification emortgage on any other property that you or any co-borrower own had a permanal or any co-borrower currently in or being considered for a HAMP trial period plan	Program (HAMP) trial period plan or permanent modification? ☐ Yes ☑ No nent HAMP modification? ☐ Yes ☑ No if "Yes", how many?
How m	any single family properties other than your principal residence do you and/or an emortgage on your principal residence ever had a Home Affordable Modification emortgage on any other property that you or any co-borrower own had a permar u or any co-borrower currently in or being considered for a HAMP trial period plan	y co-borrower(s) own individually, jointly, or with others? Program (HAMP) trial period plan or permanent modification? Yes No if "Yes", how many?
How m	any single family properties other than your principal residence do you and/or an emortgage on your principal residence ever had a Home Affordable Modification emortgage on any other property that you or any co-borrower own had a permar to rany co-borrower currently in or being considered for a HAMP trial period plan SECTION 2: HAR	y co-borrower(s) own individually, jointly, or with others? Program (HAMP) trial period plan or permanent modification?
How m Has the Has the Are you	any single family properties other than your principal residence do you and/or an emortgage on your principal residence ever had a Home Affordable Modification emortgage on any other property that you or any co-borrower own had a permar to rany co-borrower currently in or being considered for a HAMP trial period plan SECTION 2: HAR	Program (HAMP) trial period plan or permanent modification? Yes No nent HAMP modification? No if "Yes", how many? I on a property other than your principal residence? Yes No RDSHIP AFFIDAVIT ting review under MHA. ause of financial difficulties created by (check all that apply):
How m Has the Has the Are you	any single family properties other than your principal residence do you and/or an emortgage on your principal residence ever had a Home Affordable Modification emortgage on any other property that you or any co-borrower own had a permar it or any co-borrower currently in or being considered for a HAMP trial period plan SECTION 2: HAR I (We) am/are reques I am having difficulty making my monthly payment became the properties of the propert	Program (HAMP) trial period plan or permanent modification? Yes No nent HAMP modification? No if "Yes", how many? I on a property other than your principal residence? No
How m Has the Has the Are you	any single family properties other than your principal residence do you and/or and a mortgage on your principal residence ever had a Home Affordable Modification a mortgage on any other property that you or any co-borrower own had a permanal or any co-borrower currently in or being considered for a HAMP trial period plan SECTION 2: HAR I (We) am/are request a manufacture of the manufacture of the mortal payment because of the mortal payment and the properties of the payment of th	Program (HAMP) trial period plan or permanent modification? Yes No nent HAMP modification? Yes No If "Yes", how many? In a property other than your principal residence? Yes No RDSHIP AFFIDAVIT Iting review under MHA. ause of financial difficulties created by (check all that apply): My monthly debt payments are excessive and I am overextended with my creditors. Debt includes credit cards, home equity or other debt. My cash reserves, including all liquid assets, are insufficient to maintain my current mortgage payment and cover basic living expenses at the same time.
How m Has the Has the Are you	any single family properties other than your principal residence do you and/or an emortgage on your principal residence ever had a Home Affordable Modification emortgage on any other property that you or any co-borrower own had a permar tor any co-borrower currently in or being considered for a HAMP trial period plan SECTION 2: HAR I (We) am/are reques I am having difficulty making my monthly payment because of the property that you or any co-borrower currently in or being considered for a HAMP trial period plan SECTION 2: HAR I (We) am/are reques I am having difficulty making my monthly payment because of the property of the payment results and the property are seen to borrower. My expenses have increased. For example: monthly mortgage payment reset high medical or health care costs, uninsured losses, increased utilities or property taxes.	Program (HAMP) trial period plan or permanent modification? Yes No nent HAMP modification? Yes No If "Yes", how many? In a property other than your principal residence? Yes No RDSHIP AFFIDAVIT Iting review under MHA. ause of financial difficulties created by (check all that apply): My monthly debt payments are excessive and I am overextended with my creditors. Debt includes credit cards, home equity or other debt. My cash reserves, including all liquid assets, are insufficient to maintain my current mortgage payment and cover basic living expenses at the same time.
How m Has the Has the Are you	any single family properties other than your principal residence do you and/or an emortgage on your principal residence ever had a Home Affordable Modification emortgage on any other property that you or any co-borrower own had a permar to rany co-borrower currently in or being considered for a HAMP trial period plan SECTION 2: HAR I (We) am/are reques I am having difficulty making my monthly payment because in the property that your property decline in business or self employment earnings, death, disability or divorce of a borrower or co-borrower. My expenses have increased. For example: monthly mortgage payment reset high medical or health care costs, uninsured losses, increased utilities or property taxes. Il am unemployed and (a) I am receiving/will receive unemployment benefits or (b) my unemployment benefits ended less than 6 months ago.	Program (HAMP) trial period plan or permanent modification? Yes No nent HAMP modification? Yes No If "Yes", how many? In a property other than your principal residence? Yes No RDSHIP AFFIDAVIT Iting review under MHA. ause of financial difficulties created by (check all that apply): My monthly debt payments are excessive and I am overextended with my creditors. Debt includes credit cards, home equity or other debt. My cash reserves, including all liquid assets, are insufficient to maintain my current mortgage payment and cover basic living expenses at the same time.
How m Has the Has the Are you	any single family properties other than your principal residence do you and/or an emortgage on your principal residence ever had a Home Affordable Modification emortgage on any other property that you or any co-borrower own had a permar to rany co-borrower currently in or being considered for a HAMP trial period plan SECTION 2: HAR I (We) am/are reques I am having difficulty making my monthly payment because in the property that your property decline in business or self employment earnings, death, disability or divorce of a borrower or co-borrower. My expenses have increased. For example: monthly mortgage payment reset high medical or health care costs, uninsured losses, increased utilities or property taxes. Il am unemployed and (a) I am receiving/will receive unemployment benefits or (b) my unemployment benefits ended less than 6 months ago.	Program (HAMP) trial period plan or permanent modification? Yes No nent HAMP modification? Yes No If "Yes", how many? In a property other than your principal residence? Yes No RDSHIP AFFIDAVIT Iting review under MHA. ause of financial difficulties created by (check all that apply): My monthly debt payments are excessive and I am overextended with my creditors. Debt includes credit cards, home equity or other debt. My cash reserves, including all liquid assets, are insufficient to maintain my current mortgage payment and cover basic living expenses at the same time.
How m Has the Has the Are you	any single family properties other than your principal residence do you and/or an emortgage on your principal residence ever had a Home Affordable Modification emortgage on any other property that you or any co-borrower own had a permar to rany co-borrower currently in or being considered for a HAMP trial period plan SECTION 2: HAR I (We) am/are reques I am having difficulty making my monthly payment because in the property that your property decline in business or self employment earnings, death, disability or divorce of a borrower or co-borrower. My expenses have increased. For example: monthly mortgage payment reset high medical or health care costs, uninsured losses, increased utilities or property taxes. Il am unemployed and (a) I am receiving/will receive unemployment benefits or (b) my unemployment benefits ended less than 6 months ago.	Program (HAMP) trial period plan or permanent modification? Yes No nent HAMP modification? No If "Yes", how many? In a property other than your principal residence? No

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SECTION 3: PRINCIPAL RESIDENCE INFORMATION

	If "yes",	I want to: 🗵 Keep the pro	pperty Sell the pro	perty	
Property Address: 819	21st Avenue, Se	attle, WA 98122		Loan I.D. N	umber:
Other mortgages or liens on	the property?	No Lien Holder / Servi	cer Name: Shell	point Loan I.D. N	umber:
Do you have condominium	or homeowner association (He	OA) fees? Yes 🗷 No	If "Yes", Monthly Fee \$	Are fees paid o	current? Yes No
Name and address that fees	are paid to:				
oes your mortgage payme	nt include taxes and insurance	e? ▼ Yes □ No	If "No", are the taxes and in	nsurance paid current? X	es 🗆 No
nnual Homeowner's Insura		If "Voc" Listing Apont's Name		Phone Numbe	
				\$ C	
				that is not your principal resid	
Principal residence servicer	name:		Principal residence service	er phone number:	
Is the mortgage on your pr	incipal residence paid? L	res 🔲 No if 'No", no	umber of months your paym	ent is past due (if known):	
	SECTION 4: COMB	INED INCOME AND EXP	ENSE OF BORROWER	AND CO-BORROWER	
		Monthly Ususaha	old Expenses/Debt		
Monthly Hou	sehold Income	(*Principal Reside	The state of the s	Househo	old Assets
onthly Gross wages	\$	First Mortgage Principal &	s	Charling Associates	c
onthly Gloss wages	*	Interest Payment*		Checking Account(s)	>
	\$	Interest Payment* Second Mortgage Principal & Interest Payment*	\$	Checking Account(s)	\$
vertime		Second Mortgage Principal &	\$		\$
vertime If employment Income	\$	Second Mortgage Principal & Interest Payment*		Checking Account(s)	\$
vertime elf employment Income nemployment Income	\$ \$ \$	Second Mortgage Principal & Interest Payment* Homeowner's Insurance*	\$	Checking Account(s) Savings / Money Market	
vertime If employment Income hemployment Income htaxed Social Security / SSD bod Stamps/Welfare	\$ \$ \$	Second Mortgage Principal & Interest Payment* Homeowner's Insurance* Property Taxes*	\$	Checking Account(s) Savings / Money Market CDs	\$
vertime If employment Income hemployment Income htaxed Social Security / SSD and Stamps/Welfare htaxed Social Security or	\$ \$ \$ \$	Second Mortgage Principal & Interest Payment* Homeowner's Insurance* Property Taxes* HOA/Condo Fees* Credit Cards/Installment debt	\$ \$ \$	Checking Account(s) Savings / Money Market CDs Stocks / Bonds	\$
vertime of employment Income nemployment Income ntaxed Social Security / SSD ood Stamps/Welfare exable: Social Security or tirement income	\$ \$ \$ \$ \$ \$ \$ \$ \$	Second Mortgage Principal & Interest Payment* Homeowner's Insurance* Property Taxes* HOA/Condo Fees* Credit Cards/Installment debt (total min. payment)	\$ \$ \$	Checking Account(s) Savings / Money Market CDs Stocks / Bonds	\$
vertime If employment Income Interployment Interpl	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Second Mortgage Principal & Interest Payment* Homeowner's Insurance* Property Taxes* HOA/Condo Fees* Credit Cards/Installment debt (total min. payment) Child Support / Alimony	\$ \$ \$ \$	Checking Account(s) Savings / Money Market CDs Stocks / Bonds	\$
vertime elf employment Income nemployment Income ntaxed Social Security / SSD pod Stamps/Welfare exable Social Security or tirement income hild Support / Allmony** ps, commissions, bonus nd overtime	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Second Mortgage Principal & Interest Payment* Homeowner's Insurance* Property Taxes* HOA/Condo Fees* Credit Cards/Installment debt (total min. payment) Child Support / Allmony Car Payments Mortgage Payments other	\$ \$ \$ \$	Checking Account(s) Savings / Money Market CDs Stocks / Bonds	\$
vertime elf employment Income nemployment Income ntaxed Social Security / SSD pod Stamps/Welfare axable Social Security or etirement Income hild Support / Alimony** ps, commissions, bonus nd overtime ross Rents Received *** ther	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Second Mortgage Principal & Interest Payment* Homeowner's Insurance* Property Taxes* HOA/Condo Fees* Credit Cards/Installment debt (total min. payment) Child Support / Allmony Car Payments Mortgage Payments other properties****	\$ \$ \$ \$ \$ \$ \$ \$	Checking Account(s) Savings / Money Market CDs Stocks / Bonds Other Cash on Hand Value of all Real Estate except	\$ \$ \$

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by request additional documentation to compl	lete your evaluation for MHA)				
☑ Include a signed IRS Form 4506-T or 4506T-EZ					
For each borrower who is a salaried employee or at least 30 days of year-to-date income.	hourly wage earner, provide the most recent pay stub(s) that reflects				
at eart 50 days of year to date meaning					
Provide your most recent signed and dated quart	erly or year-to date profit and loss statement.				
Describe the type of income, how frequently you income (e.g., employment contracts or printouts or	receive the income and third party documentation describing the documenting tip income).				
	f frequency of the benefits, such as letters, exhibits, disability policy or of payment (such as two most recent bank statements or deposit				
Provide a copy of the divorce decree, separation a states the amount of the payments and the period	igreement, or other written legal agreement filed with the court that d of time that you are entitled to receive them. AND				
Copies of your two most recent bank statements	or deposit advices showing you have received payment.				
Notice: Alimony, child support or separate mainte have it considered for repaying your mortgage de	enance income need not be disclosed if you do not choose to bt.				
☐ Provide your most recent Federal Tax return with	all schedules, including Schedule E.				
If rental income is not reported on Schedule E, provide a copy of the current lease agreement with bank statements showing deposit of rent checks.					
operties that you or the co-borrower own, other than your Section 6 below. Use additional sheets if necessary Other Property #1	principal residence and any property described in				
	Loan I.D. Number:				
Mortgage Balance \$	Current Value \$				
	Monthly mortgage payment* \$				
Other Property #2					
	Loan I.D. Number:				
Mortgage Balance \$	Current Value \$				
al home Rented Gross Monthly Rent \$	Monthly mortgage payment* \$				
Other Property #3					
	Loan I.D. Number:				
Mortgage Balance \$	Current Value \$				
al home Rented Gross Monthly Rent \$	Monthly mortgage payment* \$				
	For each borrower who is a salaried employee or at least 30 days of year-to-date income. Provide your most recent signed and dated quart income (e.g., employment contracts or printouts.) Provide documentation showing the amount and benefits statement from the provider and receipt advices). Provide a copy of the divorce decree, separation a states the amount of the payments and the period of the pa				

^{*} The amount of the monthly payment made to your lender – including, if applicable, monthly principal, interest, real property taxes and insurance premiums..

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SMITH - Referral for Foreclosure Mediation Notice, per RCW 61.24.163(3) HAMP Application, Hardship Letter and other Documents

SECTION 6: OTHER PROPERTY FOR WHICH ASSISTANCE IS REQUESTED.

	I am requesting mortgage assistance with a rental property.
Property Add	dress: Loan I.D. Number:
)o you have	a second mortgage on the property
	condominium or homeowner association (HOA) fees?
	Iddress that fees are paid to:
	ortgage payment include taxes and insurance?
	assistance with a rental property, property is currently: Vacant and available for rent. Occupied without rent by your legal dependent, parent or grandparent as their principal residence. Occupied by a tenant as their principal residence. Other
	erty is occupied by a tenant: Term of lease / occupancy//// Gross Monthly Rent \$erty is vacant, describe efforts to rent property:
applicable	describe relationship of and duration of non-rent paying occupant of rental property:
s the prope	ty for sale?
.ist date?	Have you received a purchase offer?
By che	RENTAL PROPERTY CERTIFICATION (You must complete this certification if you are requesting a mortgage modification with respect to a rental property.) cking this box and initialing below, I am requesting a mortgage modification under MHA with respect to the rental property described in this Section 6 and
By che	RENTAL PROPERTY CERTIFICATION
By che hereb	RENTAL PROPERTY CERTIFICATION (You must complete this certification if you are requesting a mortgage modification with respect to a rental property.) (Solid this box and initialing below, I am requesting a mortgage modification under MHA with respect to the rental property described in this Section 6 and I wentify under penalty of perjury that each of the following-statements is true and correct with respect to that property: I intend to rent the property to a tenant or tenants for at least five years following the effective date of my mortgage modification. I understand that the servicer, the U.S. Department of the Treasury, or their respective agents may ask me to provide evidence of my intention to rent the property during such time. I further understand that such evidence must show that I used reasonable efforts to rent the property to a tenant or tenants on a year-round basis, if the property is or becomes vacant during such five-year period. Note: The term "reasonable efforts" includes, without limitation, advertising the property for rent in local newspapers, websites or other commonly used forms of written or electronic media, and/or engaging a real estate or other professional to assist in renting the property, in either case, at or below markets.
By cheber 1.	RENTAL PROPERTY CERTIFICATION (You must complete this certification if you are requesting a mortgage modification with respect to a rental property.) Intend to rent the property to a tenant or tenants for at least five years following the effective date of my mortgage modification. I understand that the servicer, the U.S. Department of the Treasury, or their respective agents may ask me to provide evidence of my intention to rent the property during such time. I further understand that such evidence must show that I used reasonable efforts to rent the property to a tenant or tenants on a year-round basis, if the property is or becomes vacant during such five-year period. Note: The term "reasonable efforts" includes, without limitation, advertising the property for rent in local newspapers, websites or other commonly used forms of written or electronic media, and/or engaging a real estate or other professional to assist in renting the property, in either case, at or below marker rent. The property is not my secondary residence and I do not intend to use the property as a secondary residence for at least five years following the effective date of my mortgage modification. I understand that if I do use the property as a secondary residence during such five-year period, my use of the property.
By cheber 1.	RENTAL PROPERTY CERTIFICATION (You must complete this certification if you are requesting a mortgage modification with respect to a rental property.) (Interesting the property of a tenant or tenants for at least five years following the effective date of my mortgage modification. I understand that the servicer, the U.S. Department of the Treasury, or their respective agents may ask me to provide evidence of my intention to rent the property during such time. I further understand that such evidence must show that I used reasonable efforts to rent the property to a tenant or tenants on a year-round basis, if the property is or becomes vacant during such five-year period. Note: The term "reasonable efforts" includes, without limitation, advertising the property for rent in local newspapers, websites or other commonly used forms of written or electronic media, and/or engaging a real estate or other professional to assist in renting the property, in either case, at or below marker rent. The property is not my secondary residence and I do not intend to use the property as a secondary residence for at least five years following the effective date of my mortgage modification. I understand that if I do use the property as a secondary residence during such five-year period, my use of the property may be considered to be inconsistent with the certifications I have made herein. Note: The term "secondary residence" includes, without limitation, a second home, vacation home or other type of residence that I personally use or
By chehereb 1. 2. Notwith or grance	RENTAL PROPERTY CERTIFICATION (You must complete this certification if you are requesting a mortgage modification with respect to a rental property.) (Indicating this box and initialing below, I am requesting a mortgage modification under MHA with respect to the rental property described in this Section 6 and I or certify under penalty of perjury that each of the following-statements is true and correct with respect to that property: I intend to rent the property to a tenant or tenants for at least five years following the effective date of my mortgage modification. I understand that the servicer, the U.S. Department of the Treasury, or their respective agents may ask me to provide evidence of my intention to rent the property during such time. I further understand that such evidence must show that I used reasonable efforts to rent the property to a tenant or tenants on a year-round basis, if the property is or becomes vacant during such five-year period. Note: The term "reasonable efforts" includes, without limitation, advertising the property for rent in local newspapers, websites or other commonly used forms of written or electronic media, and/or engaging a real estate or other professional to assist in renting the property, in either case, at or below marke rent. The property is not my secondary residence and I do not intend to use the property as a secondary residence for at least five years following the effective date of my mortgage modification. I understand that if I do use the property as a secondary residence during such five-year period, my use of the propert may be considered to be inconsistent with the certifications I have made herein. Note: The term "secondary residence" includes, without limitation, a second home, vacation home or other type of residence that I personally use or occupy on a part-time, seasonal or other basis.
By chehereb 1. 2. Notwith or grane certifica	RENTAL PROPERTY CERTIFICATION (You must complete this certification if you are requesting a mortgage modification with respect to a rental property) cking this box and initialing below, I am requesting a mortgage modification under MHA with respect to the rental property described in this Section 6 and I overtify under penalty of perjury that each of the following statements is true and correct with respect to that property: I intend to rent the property to a tenant or tenants for at least five years following the effective date of my mortgage modification. I understand that the servicer, the U.S. Department of the Treasury, or their respective agents may ask me to provide evidence of my intention to rent the property during such time. I further understand that such evidence must show that I used reasonable efforts to rent the property to a tenant or tenants on a year-round basis, if the property is or becomes vacant during such five-year period. Note: The term "reasonable efforts" includes, without limitation, advertising the property for rent in local newspapers, websites or other commonly used forms of written or electronic media, and/or engaging a real estate or other professional to assist in renting the property, in either case, at or below marke rent. The property is not my secondary residence and I do not intend to use the property as a secondary residence for at least five years following the effective date of my mortgage modification. I understand that if I do use the property as a secondary residence during such five-year period, my use of the propert may be considered to be inconsistent with the certifications I have made herein. Note: The term "secondary residence" includes, without limitation, a second home, vacation home or other type of residence that I personally use or occupy on a part-time, seasonal or other basis. I do not own more than five (5) single-family homes (i.e., one-to-four unit properties) (exclusive of my principal residence).

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SMITH - Referral for Foreclosure Mediation Notice, per RCW 61.24.163(3) HAMP Application, Hardship Letter and other Documents

CECTION	7. DOD	D-FRANK	CEDTIEIC	MOLTA

The following information is requested by the federal government in accordance with the Dodd-Frank Wall Street Reform and Consumer Protection Act (Pub. L. 111-203). **You are required to furnish this information.** The law provides that no person shall be eligible to begin receiving assistance from the Making Home Affordable Program, authorized under the Emergency Economic Stabilization Act of 2008 (12 U.S.C. 5201 et seq.), or any other mortgage assistance program authorized or funded by that Act, if such person, in connection with a mortgage or real estate transaction, has been convicted, within the last 10 years, of any one of the following: (A) felony larceny, theft, fraud, or forgery, (B) money laundering or (C) tax evasion.

I/we certify under penalty of perjury that I/we have not been convicted within the last 10 years of any one of the following in connection with a mortgage or real estate transaction:

- (a) felony larceny, theft, fraud, or forgery,
- (b) money laundering or
- (c) tax evasion.

I/we understand that the servicer, the U.S. Department of the Treasury, or their respective agents may investigate the accuracy of my statements by performing routine background checks, including automated searches of federal, state and county databases, to confirm that I/we have not been convicted of such crimes. I/we also understand that knowingly submitting false information may violate Federal law. This certification is effective on the earlier of the date listed below or the date this RMA is received by your servicer.

SECTION 8: INFORMATION FOR GOVERNMENT MONITORING PURPOSES

The following information is requested by the federal government in order to monitor compliance with federal statutes that prohibit discrimination in housing. You are not required to furnish this information, but are encouraged to do so. The law provides that a lender or servicer may not discriminate either on the basis of this information, or on whether you choose to furnish it. If you furnish the information, please provide both ethnicity and race. For race, you may check more than one designation. If you do not furnish the information on the basis of visual observation or surname if you have made this request for a loan modification in person. If you do not wish to furnish the information, please check the box below.

	☐ I do not wish to furnish thi	s information	CO-BORRON	WER	do not wish to furnish this information	
hnicity:	☐ Hispanic or Latino		Ethnicity:		Hispanic or Latino	
				Not Hispanic or Latino		
ace:	☐ American Indian or Alaska	Native	Race:		American Indian or Alaska Native	
	☐ Asian				Asian	
	■ Black or African American				Black or African American	
	☐ Native Hawaiian or Other	Pacific Islander			Native Hawaiian or Other Pacific Islander	
	☐ White				White	
ex:	▼ Female		Sex:		Female .	
	☐ Male] Male	
	THE STATE OF	o be completed by interviewer			Name/Address of Interviewer's Emp	loye
nis request	was taken by:	Interviewer's Name (print or type) & IE	Number			
☐ Face-to	-face Interview					
☐ Mail		Interviewer's Signature	Date			
] Telepho	one					
Internet		Interviewer's Phone Number (include	area code)			
		1				
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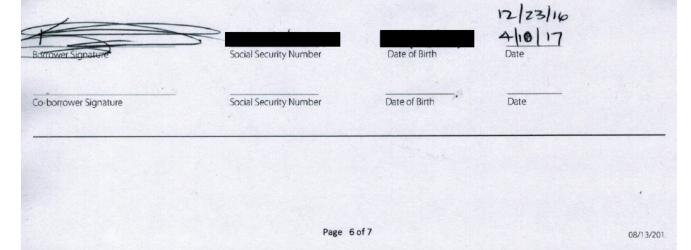
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SMITH – Referral for Foreclosure Mediation Notice, per RCW 61.24.163(3) HAMP Application, Hardship Letter and other Documents

SECTION 9: BORROWER AND CO-BORROWER ACKNOWLEDGEMENT AND AGREEMENT

- I certify that all of the information in this RMA is truthful and the hardship(s) identified above has contributed to submission of this request for mortgage
 relief.
- I understand and acknowledge that the Servicer, the U.S. Department of the Treasury, the owner or guarantor of my mortgage loan, or their respective
 agents may investigate the accuracy of my statements, may require me to provide additional supporting documentation and that knowingly submitting
 false information may violate Federal and other applicable law.
- 3. Lauthorize and give permission to the Servicer, the U.S. Department of the Treasury, and their respective agents, to assemble and use a current consumer report on all borrowers obligated on the loan, to investigate each borrower's eligibility for MHA and the accuracy of my statements and any documentation that I provide in connection with my request for assistance. I understand that these consumer reports may include, without limitation, a credit report, and be assembled and used at any point during the application process to assess each borrower's eligibility thereafter.
- 4. I understand that if I have intentionally defaulted on my existing mortgage, engaged in fraud or if it is determined that any of my statements or any information contained in the documentation that I provide are materially false and that I was ineligible for assistance under MHA, the Servicer, the U.S. Department of the Treasury, or their respective agents may terminate my participation in MHA, including any right to future benefits and incentives that otherwise would have been available under the program, and also may seek other remedies available at law and in equity, such as recouping any benefits or incentives previously received.
- 5. I certify that any property for which I am requesting assistance is a habitable residential property that is not subject to a condemnation notice.
- I certify that I am willing to provide all requested documents and to respond to all Servicer communications in a timely manner. I understand that time is of the essence.
- I understand that the Servicer will use the information I provide to evaluate my eligibility for available relief options and foreclosure alternatives, but the
 Servicer is not obligated to offer me assistance based solely on the representations in this document or other documentation submitted in connection with
 my request.
- 8. I am willing to commit to credit counseling if it is determined that my financial hardship is related to excessive debt.
- 9. If I am eligible for assistance under MHA, and I accept and agree to all terms of an MHA notice, plan, or agreement, I also agree that the terms of this Acknowledgment and Agreement are incorporated into such notice, plan, or agreement by reference as if set forth therein in full. My first timely payment, if required, following my servicer's determination and notification of my eligibility or prequalification for MHA assistance will serve as my acceptance of the terms set forth in the notice, plan, or agreement sent to me.
- 10. I understand that my Servicer will collect and record personal information that I submit in this RMA and during the evaluation process, including, but not limited to, my name, address, telephone number, social security number, credit score, income, payment history, government monitoring information, and information about my account balances and activity. I understand and consent to the Servicer's disclosure of my personal information and the terms of any MHA notice, plan or agreement to the U.S. Department of the Treasury and its agents, Fannie Mae and Freddie Mac in connection with their responsibilities under MHA, companies that perform support services in conjunction with MHA, any investor, insurer, guarantor, or servicer that owns, insures, guarantees, o services my first lien or subordinate lien (if applicable) mortgage foan(s) and to any HUD-certified housing counselor.
- 11. I consent to being contacted concerning this request for mortgage assistance at any e-mail address or cellular or mobile telephone number I have provided to the Servicer. This includes text messages and telephone calls to my cellular or mobile telephone.

The undersigned certifies under penalty of perjury that all statements in this document are true and correct.



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HOMEOWNER'S HOTLINE

If you have questions about this document or the Making Home Affordable Program, please call your servicer. If you have questions about the program that your servicer cannot answer or need further counseling, you can call the Homeowner's HOPE™ Hotline at 1-888-995-HOPE (4673).



The Hotline can help with questions about the program and offers free HUD-certified counseling services in English and Spanish.

NOTICE TO BORROWERS

Return your completed, signed and dated form to your mortgage servicer/company. If you're unsure of where to send the form, visit the Making Home Affordable website, www.makinghomeaffordable.gov. Find your mortgage company information by clicking: Get Answers >> Contact My Mortgage Company.

Be advised that by signing this document you understand that any documents and information you submit to your servicer in connection with the Making Home Affordable Program are under penalty of perjury. Any misstatement of material fact made in the completion of these documents including but not limited to misstatement regarding your occupancy of your property, hardship circumstances, and/or income, expenses, or assets will subject you to potential criminal investigation and prosecution for the following crimes: perjury, false statements, mail fraud, and wire fraud. The information contained in these documents is subject to examination and verification. Any potential misrepresentation will be referred to the appropriate law enforcement authority for investigation and prosecution. By signing this document you certify, represent and agree that: "Under penalty of perjury, all documents and information I have provided to my Servicer in connection with the Making Home Affordable Program, including the documents and information regarding my eligibility for the program, are true and correct."

If you are aware of fraud, waste, abuse, mismanagement or misrepresentations affiliated with the Troubled Asset Relief Program, please contact the SIGTARP Hotline by calling 1-877-SIG-2009 (toll-free), or www.sigtarp.gov and provide them with your name, our name as your servicer, your property address, loan number and the reason for escalation.

Beware of Foreclosure Rescue Scams. Help is FREE!

- There is never a fee to get assistance or information about the Making Home Affordable Program from your lender or a HUD-approved housing counselor.
- Beware of any person or organization that asks you to pay a fee in exchange for housing counseling services or modification of a
 delinquent loan.
- Beware of anyone who says they can "save" your home if you sign or transfer over the deed to your house. Do not sign over the deed to your property to any organization or individual unless you are working directly with your mortgage company to forgive your debt.
- · Never make your mortgage payments to anyone other than your mortgage company without their approval.
- If you think you've been scammed, visit www.makinghomeaffordable.gov. Click on Get Answers >> Avoid Scams/File a Complaint.



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SMITH - Referral for Foreclosure Mediation Notice, per RCW 61.24.163(3)

Documents for Mediation Follow Up as of July 17 2017

	R ASSISTANCE FORM							
If you are experiencing a temporary or long-term hardship and need help, you must complete and submit this form along with other required documentation to be considered for available solutions. On this page, you must disclose information about (1) you and your intentions to either keep or transition out of your home; (2) the property's status; (3) bankruptcy; and (4) your credit counseling agency.								
On Page 2, you must disclose information about <u>all</u> of your income, expenses and assets. Page 2 also lists the required income documentation that you must submit in support of your request for assistance. Then on Page 3, you must complete the Hardship Affidavit in which you disclose the nature of your hardship. The Hardship Affidavit informs you of the required documentation that you must submit in support of your hardship claim.								
NOTICE: In addition, when you sign and date this form, you will make important certifications, representations and agreements, including certifying that all of the information in this Borrower Assistance Form is accurate and truthful and any identified hardship has contributed to your submission of this request for mortgage relief.								
Borrower Assistance For	ver Response Package you rm; (2) completed and sign ncome); (3) required income	gned IRS Form 45	506T-EZ (4	4506T for self-en	ployed borrowers or			
Loan Number Servicer's Name Shellpoint			(ı	usually found on yo	our monthly mortgage statement)			
I want to:	✓ Keep the Property	☐ Vacate the P	roperty	Sell the Prop	erty 🗌 Undecided			
The property is currently:	✓ My Primary Residence	☐ A Second Ho	me	An Investme	nt Property			
The property is currently:	✓ Owner Occupied	Renter Occup	pied	☐ Vacant				
	BORROWER			CO-BO	ORROWER			
BORROWER'S NAME			CO-BORRO	OWER'S NAME				
Karen D. Smith SOCIAL SECURITY NUMBER	DATE OF BIRTH		SOCIAL SEC	URITY NUMBER	DATE OF BIRTH			
SOCIAL SECORITY NOWIBER	DATE OF BIRTH		SOCIAL SEC	ORITY NOWIBER	DATE OF BIRTH			
HOME PHONE NUMBER WITH AREA CODE HOME PHONE NUMBER WITH AREA CODE								
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206 329 9303 CELL OR WORK NUMBER WITH AR MAILING ADDRESS PO Box 22417, Seattle, WA 98 PROPERTY ADDRESS (IF SAME AS I 819 21st Ave, Seattle, WA 981 Is the property listed for sale? If yes, what was the listing dat If property has been listed for property? Date of offer: Agent's Name: Agent's Phone Number:	MAILING ADDRESS, JUST WRITE SAI 122 Yes No te? sale, have you received an offe Messale Amount of Offer: \$		Have you o Yes If yes, plea Counselor Agency's N	EMAIL ADDRESS kdelores@msn.com Contacted a credit co Se complete the cours as complete t	EA CODE			
206 329 9303 CELL OR WORK NUMBER WITH AR MAILING ADDRESS PO Box 22417, Seattle, WA 98 PROPERTY ADDRESS (IF SAME AS I 819 21st Ave, Seattle, WA 981 Is the property listed for sale? If yes, what was the listing dat If property? Date of offer: Agent's Name: Agent's Phone Number: For Sale by Owner?	BI22 MAILING ADDRESS, JUST WRITE SAI 122 Yes No see? Sale, have you received an offer No Amount of Offer: \$	er on the	Have you on Yes If yes, plea Counselor' Agency's N Counselor' Counselor'	EMAIL ADDRESS kdelores@msn.com Ontacted a credit complete the cours of	EA CODE unseling agency for help?			
206 329 9303 CELL OR WORK NUMBER WITH AR MAILING ADDRESS PO Box 22417, Seattle, WA 98 PROPERTY ADDRESS (IF SAME AS I 819 21st Ave, Seattle, WA 981 Is the property listed for sale? If yes, what was the listing dat If property? Date of offer: Agent's Name: Agent's Phone Number: For Sale by Owner?	MAILING ADDRESS, JUST WRITE SAI 122 Yes No 123 Yes No 24 Yes No 25 Amount of Offer: \$ 27 Yes No 48 No 49 No 40 N	er on the	Have you c Yes If yes, plea Counselor' Agency's N Counselor'	EMAIL ADDRESS kdelores@msn.com contacted a credit co	EA CODE unseling agency for help?			
206 329 9303 CELL OR WORK NUMBER WITH AR MAILING ADDRESS PO Box 22417, Seattle, WA 98 PROPERTY ADDRESS (IF SAME AS I 819 21st Ave, Seattle, WA 981 Is the property listed for sale? If yes, what was the listing dat If property? Date of offer: Agent's Name: Agent's Name: Agent's Phone Number: For Sale by Owner? Do you have condominium or Total monthly amount: \$	MAILING ADDRESS, JUST WRITE SAI 122 Yes No 122 Yes No 123 Yes No Amount of Offer: \$ Yes No homeowner association (HOA)	fees? Yes	Have you on Yes If yes, pleat Counselor' Agency's No Counselor' V No ees are paid	EMAIL ADDRESS kdelores@msn.com contacted a credit co	unseling agency for help? nselor contact information below:			
206 329 9303 CELL OR WORK NUMBER WITH AR MAILING ADDRESS PO Box 22417, Seattle, WA 98 PROPERTY ADDRESS (IF SAME AS I 819 21st Ave, Seattle, WA 981 Is the property listed for sale? If yes, what was the listing dat If property has been listed for property? Date of offer: Agent's Name: Agent's Phone Number: For Sale by Owner? Do you have condominium or	AREA CODE B122 MAILING ADDRESS, JUST WRITE SAI 122 Yes No Yes No Amount of Offer: \$ Yes No homeowner association (HOA) Name Yes No If yes	fees? Yes	Have you c Yes If yes, plea Counselor Agency's N Counselor Ounselor T No ees are paid	EMAIL ADDRESS kdelores@msn.com contacted a credit co	EA CODE unseling agency for help?			
206 329 9303 CELL OR WORK NUMBER WITH AR MAILING ADDRESS PO Box 22417, Seattle, WA 98 PROPERTY ADDRESS (IF SAME AS I 819 21st Ave, Seattle, WA 981 Is the property listed for sale? If yes, what was the listing dat If property has been listed for property? Date of offer: Agent's Name: Agent's Name: Agent's Phone Number: For Sale by Owner? Do you have condominium or Total monthly amount: \$ Have you filed for bankruptcy's If yes, what is the filing Date: Is any Borrower an active duty Has any Borrower been deployed.	MAILING ADDRESS, JUST WRITE SAI 122 Yes No te? Sale, have you received an offer Yes No Amount of Offer: \$ Yes No homeowner association (HOA) Name Yes No If yes 06/05/2008 Has your bankrup	fees? Yes e and address that fees cotcy been discharged	Have you on Yes If yes, plea Counselor' Agency's N Counselor' Counselor' V No ees are paid r 7 Yes ed a Permar	EMAIL ADDRESS kdelores@msn.com contacted a credit co No see complete the cou 's Name: Jame: 's Phone Number: 's Email Address: I to: Chapter 11 No Bankru	unseling agency for help? nselor contact information below: Chapter 12			

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Documents for Mediation Follow Up as of July 17 2017

UNIFORM BORROWER AS		_							
Monthly Household Income			Monthly Household Expenses and Debt Payments				Household Assets (associated with the property and/or borrower(s)excluding retirement funds)		
Gross wages	\$	First N	lortgage Payment		\$	Checking Accou	ınt(s)	\$ 1	
Overtime	\$	Secon	d Mortgage Payment		\$	Checking Account(s)		\$	
Child Support / Alimony*	\$	Home	owner's Insurance		\$	Savings / Mone	ey Market	\$	
Non-taxable social security/SSDI	\$	Prope	ty Taxes		\$	CDs		\$	
Taxable SS benefits or other monthly income from annuities or retirement plans	\$		Cards / Installment Loa um payment per monti		\$	Stocks / Bonds		\$	
Tips, commissions, bonus and self- employed income	\$	Alimoi	ny, child support payme	ents	\$	Other Cash on Hand		\$	
Rents Received	\$	Car Le	ase Payments		\$	Other Real Esta	ite (estimated value)	\$	
Unemployment Income	\$	HOA/0	Condo Fees/Property M	aintenance	\$	Other T		\$	
Food Stamps/Welfare	\$	Mortg	age Payments on other	properties	\$			\$	
Other	\$	Other	Utilites and Bus Ex	кр	\$			\$	
Total (Gross income)	\$	Total Payme	Household Expenses a	nd Debt		Total Assets		\$	
Any other liens (mortgage liens, me	echanics lie				l	<u> </u>			
Lien Holder's Name	Balance	and Inter	est Rate	Loan Num	ber		Lien Holder's Phone	Number	
		ı	Required Income	Docum	entation				
Do you earn a salary or hourly For each borrower who is a sa paid by the hour, include pays most recent 30 days' earnings reflecting year-to-date earning on the paystubs (e.g. signed le from employer).	laried emp tub(s) refle and docun gs, if not re	cting the nentation ported	individual feder either the most that reflects ac	wer who r ral income recent sig tivity for tl	tax return and gned and dated he most recent	d, as applicabl d quarterly or t three month	ne, include a comple e, the business tax r year-to-date profit/l s; OR copies of bank ing continuation of l	eturn; AND oss statement statements for	
Do you have any additional sources of income? Provide for each borrower as applicable: "Other Earned Income" such as bonuses, commissions, housing allowance, tips, or overtime: Reliable third-party documentation describing the amount and nature of the income (e.g., paystub, employment contract or printouts documenting tip income). Social Security, disability or death benefits, pension, public assistance, or adoption assistance: Documentation showing the amount and frequency of the benefits, such as letters, exhibits, disability policy or benefits statement from the provider, and Documentation showing the receipt of payment, such as copies of the two most recent bank statements showing deposit amounts. Rental income: Copy of the most recent filed federal tax return with all schedules, including Schedule E—Supplement Income and Loss. Rental income for qualifying purposes will be 75% of the gross rent you reported reduced by the monthly debt service on the property, if applicable; or If rental income is not reported on Schedule E — Supplemental Income and Loss, provide a copy of the current lease agreement with either bank statements or cancelled rent checks demonstrating receipt of rent. Investment income: Copies of the two most recent investment statements or bank statements supporting receipt of this income. Alimony, child support, or separation maintenance payments as qualifying income:* Copy of divorce decree, separation agreement, or other written legal agreement filed with a court, or court decree that states the amount of the alimony, child support, or separation maintenance payments and the period of time over which the payments will be received, and Copies of your two most recent bank statements or other third-party documents showing receipt of payment.									
*Notice: Alimony, child support, this loan.	or separate	e maintena	ance income need no	ot be reve	aled if you do	not choose to	have it considered	for repaying	

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Documents for Mediation Follow Up as of July 17 2017

UN	IIFORM BORROWER ASSISTANCE FO	RM	
			HARDSHIP AFFIDAVIT
	requesting review of my current financial si ons. Date Hardship Began is: 2007	tuatio	on to determine whether I qualify for temporary or permanent mortgage loan relief
l be	ieve that my situation is:		<u>_</u>
	Short-term (under 6 months) 🔲 Medium-	term	(6 − 12 months)
	ո having difficulty making my monthly բ	•	
(Ple	ase check the primary reason and submit red	uired	documentation demonstrating your primary hardship)
If Y	our Hardship is:	The	n the Required Hardship Documentation is:
	Unemployment		No hardship documentation required
✓	Reduction in Income: a hardship that	✓	No hardship documentation required
	has caused a decrease in your income		·
	due to circumstances outside your		
	control (e.g., elimination of overtime,		
	reduction in regular working hours, a		
_	reduction in base pay)		
Ш	Increase in Housing Expenses: a		No hardship documentation required
	hardship that has caused an increase in		
	your housing expenses due to		
$\overline{}$	circumstances outside your control	\vdash	Diverse degree signed by the security OD
Ш	Divorce or legal separation; Separation of Borrowers unrelated by marriage,	H	Divorce decree signed by the court; OR Separation agreement signed by the court; OR
	civil union or similar domestic	H	Current credit report evidencing divorce, separation, or non-occupying
	partnership under applicable law		borrower has a different address; OR
	partitership under applicable law		Recorded quitclaim deed evidencing that the non-occupying Borrower or co-
			Borrower has relinquished all rights to the property
	Death of a borrower or death of either		Death certificate; OR
	the primary or secondary wage earner		Obituary or newspaper article reporting the death
	in the household		
	Long-term or permanent disability;		Proof of monthly insurance benefits or government assistance (if applicable); OR
	Serious illness of a borrower/co-		Written statement or other documentation verifying disability or illness; OR
	borrower or dependent family member		Doctor's certificate of illness or disability; OR
			Medical bills
_		None	e of the above shall require providing detailed medical information.
Ш	Disaster (natural or man-made)	片	Insurance claim; OR
	adversely impacting the property or		Federal Emergency Management Agency grant or Small Business Administration
	Borrower's place of employment		loan; OR Borrower or Employer property located in a federally declared disaster area
$\overline{}$	Distant employment transfer / Relocation	Eor a	active duty service members: Notice of Permanent Change of Station (PCS) or
ш	Distant employment transfer / Nelocation		al PCS orders.
		1	employment transfers/new employment:
			Copy of signed offer letter or notice from employer showing transfer to a new
			employment location; OR
			Pay stub from new employer; OR
			If none of these apply, provide written explanation
		In ad	ldition to the above, documentation that reflects the amount of any relocation
		assis	tance provided, if applicable (not required for those with PCS orders).
	Business Failure	Ш	Tax return from the previous year (including all schedules) AND
			Proof of business failure supported by one of the following:
			Bankruptcy filing for the business; OR
			Two months recent bank statements for the business account evidencing
			cessation of business activity; OR
			Most recent signed and dated quarterly or year-to-date profit and loss statement
\Box	Other: a hardship that is not covered		Written explanation describing the details of the hardship and relevant
	above	_	documentation

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SMITH - Referral for Foreclosure Mediation Notice, per RCW 61.24.163(3)

Documents for Mediation Follow Up as of July 17 2017

Borrower/Co-Borrower Acknowledgement and Agreement

I certify, acknowledge, and agree to the following:

- All of the information in this Borrower Assistance Form is truthful and the hardship that I have identified contributed to my need for mortgage relief.
- The accuracy of my statements may be reviewed by the Servicer, owner or guarantor of my mortgage, their
 agent(s), or an authorized third party*, and I may be required to provide additional supporting documentation.
 I will provide all requested documents and will respond timely to all Servicer, or authorized third party*,
 communications.
- 3. Knowingly submitting false information may violate Federal and other applicable law.
- 4. If I have intentionally defaulted on my existing mortgage, engaged in fraud or misrepresented any fact(s) in connection with this request for mortgage relief or if I do not provide all required documentation, the Servicer may cancel any mortgage relief granted and may pursue foreclosure on my home and/or pursue any available legal remedies.
- 5. The Servicer is not obligated to offer me assistance based solely on the representations in this document or other documentation submitted in connection with my request.
- 6. I may be eligible for a trial period plan, repayment plan, or forbearance plan. If I am eligible for one of these plans, I agree that:
 - All the terms of this Acknowledgment and Agreement are incorporated into such plan by reference as
 if set forth in such plan in full.
 - b. My first timely payment under the plan will serve as acceptance of the terms set forth in the notice of the plan sent by the Servicer.
 - c. The Servicer's acceptance of any payments under the plan will not be a waiver of any acceleration of my loan or foreclosure action that has occurred and will not cure my default unless such payments are sufficient to completely cure my entire default under my loan.
 - d. Payments due under a trial period plan for a modification will contain escrow amounts. If I was not previously required to pay escrow amounts, and my trial period plan contains escrow amounts, I agree to the establishment of an escrow account and agree that any prior waiver is revoked. Payments due under a repayment plan or forbearance plan may or may not contain escrow amounts. If I was not previously required to pay escrow amounts and my repayment plan or forbearance plan contains escrow amounts, I agree to the establishment of an escrow account and agree that any prior escrow waiver is revoked.
- 7. A condemnation notice has not been issued for the property.
- 8. The Servicer or authorized third party* will obtain a current credit report on all borrowers obligated on the Note.
- 9. The Servicer or authorized third party* will collect and record personal information that I submit in this Borrower Response Package and during the evaluation process. This personal information may include, but is not limited to: (a) my name, address, telephone number, (b) my social security number, (c) my credit score, (d) my income, and (e) my payment history and information about my account balances and activity. I understand and consent to the Servicer or authorized third party*, as well as any investor or guarantor (such as Fannie Mae or Freddie Mac), disclosing my personal information and the terms of any relief or foreclosure alternative that I receive to the following:
 - Any investor, insurer, guarantor, or servicer that owns, insures, guarantees, or services my first lien or subordinate lien (if applicable) mortgage loan(s) or any companies that perform support services to them: and
 - The U.S. Department of Treasury, Fannie Mae and Freddie Mac, in conjunction with their responsibilities under the Making Home Affordable program, or any companies that perform support services to them.
- 10. I consent to being contacted concerning this request for mortgage assistance at any telephone number, including mobile telephone number, or email address I have provided to the Lender/Servicer/ or authorized third party*. By checking this box, I also consent to being contacted by text messaging.

+5	06/30/2017		
Borrower Signature	Date	Co-Borrower Signature	Date

^{*}An authorized third party may include, but is not limited to, a counseling agency, Housing Finance Agency (HFA) or other similar entity that is assisting me in obtaining a foreclosure prevention alternative.

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SMITH - Referral for Foreclosure Mediation Notice, per RCW 61.24.163(3)

Documents for Mediation Follow Up as of July 17 2017

HELP FOR AMERICA'S HOMEOWNERS



Dodd-Frank Certification

The following information is requested by the federal government in accordance with the Dodd-Frank Wall Street Reform and Consumer Protection Act (Pub. L. 111-203). **You are required to furnish this information.** The law provides that no person shall be eligible to begin receiving assistance from the Making Home Affordable Program, authorized under the Emergency Economic Stabilization Act of 2008 (12 U.S.C. 5201 *et seq.*), or any other mortgage assistance program authorized or funded by that Act, if such person, in connection with a mortgage or real estate transaction, has been convicted, within the last 10 years, of any one of the following: (A) felony larceny, theft, fraud, or forgery, (B) money laundering or (C) tax evasion.

I/we certify under penalty of perjury that I/we have not been convicted within the last 10 years of any one of the following in connection with a mortgage or real estate transaction:

- (a) felony larceny, theft, fraud, or forgery,
- (b) money laundering or
- (c) tax evasion.

I/we understand that the servicer, the U.S. Department of the Treasury, or their agents may investigate the accuracy of my statements by performing routine background checks, including automated searches of federal, state and county databases, to confirm that I/we have not been convicted of such crimes. I/we also understand that knowingly submitting false information may violate Federal law.

This Certificate is effective on the earlier of the date listed below or the date received by your servicer.

•				06/30/2017
,	Borrower Signature	Social Security Number	Date of Birth	Date
	Co-Borrower Signature	Social Security Number	Date of Birth	Date